PATENT APPLICATION FEE DETERMINATION DEGO

Application or Docket Number

Effective December 8, 2004						1 10	10/ 582 397			
		CLAIMS		D - PART I	(Column 2)	SMALL EN		OF	OTHER	THAN
U.S	. NATIONAL	STAGE FEES				RATE	FEE	7.	RATE	FEE
BASIC FEE					BASIC FEE		OR	BASIC FEE	211	
EXAMINATION FEE					EXAM. FEE	 	-	EXAM. FEE	20	
SEARCH FEE					SEARCH FEE	 	1	SEARCH FEE	1/2	
FEE FOR EXTRA SPEC. PGS.			minus 100 =	/ 50 =	X \$ 125 =	 	1		tel	
TOTAL CHARGEABLE CLAIMS		100	minus 20 =	770	X \$ 25 =	 	-	X \$ 250 =		
INDEPENDENT CLAIMS		2	minus 3 =		X \$ 100 =		OR		1250	
MULTIPLE DEPENDENT CLAIM PRE			RESENT			┨ ├───		OR		
* If the difference in column 1 is less				zero, enter "0	" in column 2	+ \$ 180 =		OR OR	+ \$ 360 =	
		(Column 1) CLAIMS REMAINING	AMEND	(Colum HIGHE	nn 2) (Column 3)	SMALL E	NTITY ADDI-	OR	OTHER SMALL E	
AMENDMENT A	Total Independent FIRST PRES	AFTER AMENDMENT * * SENTATION OF N	Minus Minus MULTIPLE D	NUMB PREVIOU PAID F ** *** EPENDENT C	USLY EXTRA	X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADDIT.	TIONAL FEE	OR OR OR	X \$ 50 = X \$ 200 = + \$ 360 =	
	Independent	AFTER AMENDMENT * * * * * * * * * * * *	Minus	PREVIOUS PAID F	USLY EXTRA = =	X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADDIT. FFF	TIONAL FEE	OR	X \$ 50 = X \$ 200 = + \$ 360 = TOTAL ADDIT. FFF	TIONA FEE
NT B AMENDMENT	Independent FIRST PRES	AFTER AMENDMENT * * COlumn 1) CLAIMS REMAINING AFTER AMENDMENT	Minus MULTIPLE D	PREVIOUS PAID FOR PREVIOUS PAID FOR PAI	USLY EXTRA = = LAIM	X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADDIT.	TIONAL FEE	OR OR	X \$ 50 = X \$ 200 = + \$ 360 = TOTAL ADDIT. FFF	TIONAL FEE
NT B AMENDMENT	Independent FIRST PRES	AFTER AMENDMENT * * Claims REMAINING AFTER	Minus MULTIPLE D	PREVIOUS PAID FOR STATE PREVIOUS PAID FOR STATE PAI	USLY EXTRA = = LAIM	X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADDIT. FFF	ADDI- TIONAL FEE	OR OR	X \$ 50 = X \$ 200 = + \$ 360 = TOTAL ADDIT. FFF	ADDI- TIONAL
B AMENDMENT	Independent FIRST PRES Total Independent	AFTER AMENDMENT * * COlumn 1) CLAIMS REMAINING AFTER AMENDMENT *	Minus MULTIPLE D Minus Minus	PREVIOUS PAID FOR A STATE PAID FOR A STA	USLY EXTRA = =	X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADDIT. FFF	ADDI- TIONAL FEE	OR OR OR	X \$ 50 = X \$ 200 = + \$ 360 = TOTAL ADDIT. FFF RATE	ADDI- TIONAL
AMENDMENT	Independent FIRST PRES Total Independent	AFTER AMENDMENT * * COlumn 1) CLAIMS REMAINING AFTER AMENDMENT	Minus MULTIPLE D Minus Minus	PREVIOUS PAID FOR A STATE PAID FOR A STA	USLY EXTRA = =	X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADDIT. FFF RATE X \$ 25 =	ADDI- TIONAL FEE	OR OR OR	X \$ 50 = X \$ 200 = + \$ 360 = TOTAL ADDIT. FFF RATE X \$ 50 =	ADDI- TIONAL

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.